

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Number::  
Filing date:: February 19, 2004 (02-19-2004)  
Application Type:: Regular  
Subject Matter:: Diode Laser  
CD-ROM or CD-R?:: None  
Title Line One:: BROADBAND EXTERNAL CAVITY  
Title Line Two:: DIODE LASER  
Attorney Docket Number:: 70047-40-UT  
Request for Early  
Publication?:: No  
Request for  
Non-Publication?:: Yes  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 2  
Small Entity?:: Yes  
Petition Included?:: No  
Licensed US Govt. Agency:: U.S. National Aeronautics and Space Admin  
Contract or Grant Numbers:: NAS3-01007  
Secrecy Order in Parent  
Appl.?:: No

### APPLICANT INFORMATION

1) Applicant Authority Type:: Inventor  
Primary Citizenship:: US  
Country:: United States  
Status:: Full Capacity  
Inventor One Given Name:: Jeffrey  
Middle Name:: S.  
Family Name:: Pilgrim  
Name Suffix::  
City of Residence:: Santa Fe  
State or Province of  
Residence:: New Mexico  
Country of Residence:: U.S.  
Street of Mailing Address:: 67 Condesa Road  
City of Mailing Address:: Santa Fe  
State or Province of  
Mailing Address:: New Mexico  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing  
Address:: 87505  
1) Applicant Authority Type:: Inventor

**Primary Citizenship::** US  
**Country::** United States  
**Status::** Full Capacity  
**Inventor One Given Name::** Daniel  
**Middle Name::** J.  
**Family Name::** Kane  
**Name Suffix::**  
**City of Residence::** Santa Fe  
**State or Province of Residence::** New Mexico  
**Country of Residence::** U.S.  
**Street of Mailing Address::** 2659 Via Berrenda  
**City of Mailing Address::** Santa Fe  
**State or Province of Mailing Address::** New Mexico  
**Country of Mailing Address::** US  
**Postal or Zip Code of Mailing Address::** 87505

#### **CORRESPONDENCE INFORMATION**

**Correspondence Customer No.** 005179  
**Phone Number::** (505) 998-1500  
**Fax Number::** (505) 243-2542  
**E-Mail Address::** jmyers@peacocklaw.com

#### **REPRESENTATIVE INFORMATION**

**Representative Customer Number::** 005179

#### **DOMESTIC PRIORITY INFORMATION**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
<b>This Application</b>	<b>Continuation-in-part of</b>	<b>USSN 10/399,587</b>	<b>Jan 8, 2003</b>
<b>This Application</b>	<b>Utility application for</b>	<b>USSN 60/449,278</b>	<b>Feb 20, 2003</b>

## FOREIGN PRIORITY INFORMATION

Country::	Application Number::	Filing Date::	Priority Claimed::
n/a			

## ASSIGNEE INFORMATION

**Assignee Name::** SOUTHWEST SCIENCES INCORPORATED  
**Street of Mailing Address::** 1570 Pacheco Street, Suite E-11  
**City of Mailing Address::** Santa Fe  
**State or Province of Mailing Address:** New Mexico  
**Country of Mailing Address::** US  
**Postal or Zip Code of Mailing Address::** 87505